WHAT IS CLAIMED IS:

1. A method for ablating tumor cells in a subject having at least one tumor site, the method comprising:

   (a) contacting the tumor cells in at least one tumor with a lytic agent *in vivo,* under lytic conditions, forming a treated tumor; and

   (b) applying a sufficient *in vivo* stimulus to the treated tumor forming a stimulated tumor.

2. The method of claim 1, wherein contacting the tumor cells with a lytic agent occurs before applying the *in vivo* stimulus; or applying the *in vivo* stimulus to the tumor occurs before contacting the tumor cells with a lytic agent; or contacting the tumor cells with a lytic agent and the applying the *in vivo* stimulus occur simultaneously.

3. The method of claim 1, further comprising: waiting a first period of time after contacting the tumor cells in at least one tumor with a lytic agent *in vivo*, but before applying the *in vivo* stimulus.

4. The method of claim 3, further comprising: repeating following method steps for a first-number of rounds:

   (a) contacting the tumor cells in the treated tumor with the lytic agent *in vivo*;

   waiting a period of time; and

   (b) applying an *in vivo* stimulus to the treated tumor.

5. The method of claim 4, wherein the first-number of rounds is in a range of 1 to about 5 rounds.

6. The method of claim 4, wherein the first period of time is about 1 to about 10 days.

7. The method of claim 4, further comprising: applying an *in vivo* stimulus to the treated tumor for a second-number of rounds:

8. The method of claim 7, wherein the second-number of rounds is in a range of about 1 to about 16 rounds.

9. The method of claim 1, wherein applying the stimulus is for about 15 minutes to about 90 minutes.

10. The method of claim 1, wherein the tumor comprises: a nasopharyngeal carcinoma, a chondrosarcoma, a cancer of the colon, Dukes's D, and non-small cell lung cancer.

11. The method of claim 1, wherein the tumor cells are cells of breast cancer, prostate cancer, ovarian cancer, malignant hepatoma, carcinoma of esophagus, small cell lung cancer, lung cancer, cancer of rectum, carcinoma of stomach, carcinoma of ovarium, ascites, or melanoma.

12. The method of claim 1, wherein the lytic agent comprises an isolated oncolytic virus that replicates in the tumor cells and is inhibited from replicating in non-tumor cells; and wherein the lytic conditions comprise infective conditions.

13. The method of claim 12, wherein the isolated oncolytic virus comprises an adenovirus not having a functional viral oncoprotein; and wherein tumor cells lack a functional p53- or a functional RB- gene product.

14. The method of claim 13, wherein the functional viral oncoprotein comprises a p53- or RB- binding protein.

15. The method of claim 1, wherein the lytic agent comprises an isolated oncolytic virus having a sequence at least 95% identical to SeqID#1 or a sequence at least 95% identical to SeqID#2; and the lytic conditions comprise infective conditions.

16. The method of claim 1, wherein the isolated oncolytic virus is an isolated herpes simplex virus, an isolated reovirus, an isolated newcastle virus, an isolated poliovirus, an isolated measles virus, or an isolated vesicular stomatis virus.

17. The method of claim 1, wherein the lytic agent comprises an oncolytic bacteria.

18. The method of claim 17, wherein the oncolytic bacteria is *Salmonella, Bifidobacterium, Shigella, Listeria, Yersinia* or *Clostridium.*

19. The method of claim 1, wherein the lytic agent comprises an isolated nucleic acid expression construct that encodes a gene comprising: an apoptotic gene, a cytolytic gene, a tumor necrosis factor gene, a negative I-κ-β gene, a caspase gene, a γ-globulin gene, or a hα-1 antitrypsin, wherein the encoded gene is used for the purpose of oncolysis.

20. The method of claim 1, wherein the *in vivo* stimulus comprises a local hyperthermia in a range of about 1 to about 7 degrees Celsius above a normal body temperature for the subject.

21. The method of claim 1, wherein the *in vivo* stimulus comprises high-frequency electromagnetic pulses.

22. The method of claim 1, wherein the *in vivo* stimulus comprises radiofrequency diathermy, wherein the radiofrequency is in the range of 0.1 to 100MHz.

23. The method of claim 1, wherein the *in vivo* stimulus comprises microwave diathermy, wherein the microwave is in the range of 100 to 2,450 MHz.

24. The method of claim 1, wherein the stimulus comprises a ultrasound diathermy.

25. The method of claim 1, wherein the an *in vivo* stimulus comprises a systemic hyperthermia.

26. The method of claim 1, wherein the stimulus is an anoxia, a radiation, an alcohol, or a glutamine treatment, or infection.

27. The method of claim 1, wherein, the stimulated tumor expresses at least one chaperone protein at an elevated level compared to that of the tumor prior to applying the stimulus and wherein the chaperone protein comprises a heat shock protein ("HSP").

28. The method of claim 27, wherein the heat shock protein is HSP 70, Hsp30, Hsp60, Hsp90, Hsp94, Hsp96, or Hsp110.

29. A method for ablating tumor cells in a subject having at least a first tumor and a distal tumor, the method comprising:

(a) contacting the tumor cells in the first-tumor with a lytic agent *in vivo,* under lytic conditions, forming a treated first-tumor, the distal tumor is not contacted with the lytic agent; and

(b) applying an *in vivo* stimulus to the treated first-tumor forming a stimulated first-tumor, the distal tumor is not stimulated.

30. The method of claim 29, wherein contacting the tumor cells of the first tumor with a lytic agent occurs before applying the *in vivo* stimulus; or applying the *in vivo* stimulus to the tumor occurs before contacting the tumor cells with a lytic agent; or contacting the tumor cells with a lytic agent and the applying the *in vivo* stimulus occur simultaneously.

31. The method of claim 29, further comprising: waiting a first period of time after contacting the tumor cells in at least one tumor with a lytic agent *in vivo*, but before applying the *in vivo* stimulus.

32. The method of claim 31, further comprising: repeating following method steps for a first-number of rounds:

(a) contacting the tumor cells in the first-tumor with the lytic agent *in vivo*;

waiting a period of time; and

(b) applying the *in vivo* stimulus to the treated first-tumor.

33. The method of claim 32, wherein the first-number of rounds is in a range of 1 to about 5 rounds.

34. The method of claim 32, wherein the first period of time is about 1 to about 10 days.

35. The method of claim 32, further comprising: repeating applying an *in vivo* stimulus to the treated first-tumor for a second-number of rounds:

36. The method of claim 32, wherein the second-number of rounds is in a range of about 1 to about 16 rounds.

37. The method of claim 29, wherein applying the stimulus is for about 15 minutes to about 90 minutes.

38. The method of claim 29, wherein the first tumor is a nasopharyngeal carcinoma, a chondrosarcoma, a cancer of the colon, Dukes's D, or a non-small cell lung cancer and the distal-tumor comprises a metastasis thereof.

39. The method of claim 29, wherein the tumor cells of the first tumor are cells of breast cancer, prostate cancer, ovarian cancer, malignant hepatoma, carcinoma of esophagus, small cell lung cancer, lung cancer, cancer of rectum, carcinoma of stomach, carcinoma of ovarium, ascites or melanoma; and the distal-tumor comprises a metastasis thereof.

40. The method of claim 29, wherein the lytic agent comprises an isolated oncolytic virus that replicates in the tumor cells and is inhibited from replicating in non-tumor cells; and wherein the lytic conditions comprise infective conditions.

41. The method of claim 40, wherein the isolated oncolytic virus comprises an adenovirus not having a functional viral oncoprotein; and wherein tumor cells lack a functional p53- or a functional RB- gene product.

42. The method of claim 41, wherein the functional viral oncoprotein comprises a p53- or RB- binding protein.

43. The method of claim 29, wherein the lytic agent comprises an isolated oncolytic virus having a sequence at least 95% identical to SeqID#1 or a sequence at least 95% identical to SeqID#2; and the lytic conditions comprise infective conditions.

44. The method of claim 29, wherein the isolated oncolytic virus is an isolated herpes simplex virus, an isolated reovirus, an isolated newcastle virus, an isolated poliovirus, an isolated measles virus, or an isolated vesicular stomatis virus.

45. The method of claim 29, wherein the lytic agent comprises an oncolytic bacteria.

46. The method of claim 45, wherein the oncolytic bacteria is *Salmonella, Bifidobacterium, Shigella, Listeria, Yersinia* or *Clostridium*.

47. The method of claim 29, wherein the lytic agent comprises an isolated nucleic acid expression construct that encodes a gene comprising: an apoptotic gene, a cytolytic gene, a tumor necrosis factor gene, a negative I-κ-β gene, a caspase gene, a γ-globulin gene, or a hα-1 antitrypsin, wherein the encoded gene is used for the purpose of oncolysis.

48. The method of claim 29, wherein the *in vivo* stimulus comprises a local hyperthermia in a range of about 1 to about 7 degrees Celsius above a normal body temperature for the subject.

49. The method of claim 29, wherein the *in vivo* stimulus comprises high-frequency electromagnetic pulses.

50. The method of claim 29, wherein the *in vivo* stimulus comprises radiofrequency diathermy, wherein the radiofrequency is in the range of 0.1 to 100MHz.

51. The method of claim 29, wherein the *in vivo* stimulus comprises microwave diathermy, wherein the microwave is in the range of 100 to 2,450 MHz.

52. The method of claim 29, wherein the stimulus comprises a ultrasound diathermy.

53. The method of claim 29, wherein the an *in vivo* stimulus comprises a systemic hyperthermia.

54. The method of claim 29, wherein the stimulus is an anoxia, a radiation, an alcohol, or a glutamine treatment, or infection.

55. The method of claim 29, wherein, the stimulated first tumor expresses at least one chaperone protein at an elevated level compared to that of the tumor prior to applying the stimulus and wherein the chaperone protein comprises a heat shock protein ("HSP").

56. The method of claim 55, wherein the heat shock protein is HSP 70, Hsp30, Hsp60, Hsp90, Hsp94, Hsp96, or Hsp110.

57. A method for shrinking a distal-nasopharyngeal carcinoma in a subject having the distal-nasopharyngeal carcinoma and a first-nasopharyngeal carcinoma comprising:

(a) contacting the a first-nasopharyngeal carcinoma with an isolated oncolytic adenovirus forming a treated carcinoma;

(b) waiting a first period of time;

(c) applying a stimulus to the treated carcinoma for a second period of time; the stimulus raising a local temperature of the treated carcinoma in a range of about 1 to about 7 degrees Celsius above a normal body temperature of the subject;

(d) repeating steps (a), (b), and (c) for a first-number of rounds; and

(e) repeating step (c) for a second-number of rounds;

wherein,

the first period of time is in a range of about 1 to about 10 days; the second period of time is about 15 minutes to about 90 minutes; the first-number of rounds is in a range of 1 to about 5 rounds; the second-number of rounds is in a range of about 1 to about 16 rounds.

58. The method of claim 57, wherein the isolated oncolytic adenovirus comprises SeqID#1 or SeqID#2.

59. The method of claim 57, wherein the stimulus is localized to the treated carcinoma and the stimulus is selected from a group consisting of: a high-frequency electromagnetic pulse; a radiofrequency in the range of 0.1 to 100Mhz; a microwave diathermy in the range of 100 to 2,450 Mhz; or an ultrasound diathermy, wherein the stimulus increases a level of the chaperone protein in the first-tumor and the chaperone protein is Hsp 70, Hsp30, Hsp60, Hsp90, Hsp94, Hsp96, or Hsp110.

60. An isolated nucleic acid comprising a sequence at least 95% identical to SeqID#1, or a degenerate variant of SEQID#1.

61. An isolated nucleic acid comprising a sequence at least 95% identical to SeqID#2, or a degenerate variant of SEQID#2.